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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identif | fy Yourself | | |
|--|---------------|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full na | ame | Lisa | |
| Write the name that is | ne that is on | First name | First name |
| your governm picture identifi | ication (for | Middle name | Middle name |
| example, your license or pas | | Hicks Last name | Last name |
| Dain a consumation | | Last Haine | Last Harie |
| Bring your pic identification t meeting with | to your | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other na | ames vou | | |
| have used | - | First name | First name |
| 8 years | | - | |
| Include your r | married or | Middle name | Middle name |
| maiden name | es. | Last name | Last name |
| | | | |
| | | First name | First name |
| | | - | |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. Only the las | st 4 digits | XXX - XX3084 | XXX - XX- |
| Security nu federal Ind | umber or | OR | OR |
| Taxpayer Identification | | 9 xx - xx- | 9 xx - xx- |
| (ITIN) | _ | | |

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| About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Business name Business name Business name Business name Business name Business name Bin Ein 5. Where you live About Debtor 2 (Spouse Only in a Joint Case): I have not used any business names or EINs. | De | ebtor 1 Lisa First Name | HICKS Middle Name Last Name | Case number (if known) |
|--|----|----------------------------|---|---|
| and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names EIN EIN EIN Street Mumber Street | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | 4. | and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Include trade names and doing business as names EIN EIN EIN 5. Where you live 5. Where you live Chicago Illinois 60619 City State Zip Code County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code County If Debtor 2 lives at a different address: Number Street County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 is mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street Number Street City State Zip Code City State Zip Code Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Numbers (EIN) you | Business name | Business name |
| doing business as names EIN EIN EIN 5. Where you live 348 E. 91 st | | | Business name | Business name |
| 5. Where you live 348 E. 91st | | | EIN | EIN |
| Street Number Street Number Street Street Number Street | | | EIN | EIN |
| Number Street Chicago Illinois 60619 City State Zip Code | 5. | Where you live | 040 5 04-1 | If Debtor 2 lives at a different address: |
| City State Zip Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code City State Zip Code If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street City State Zip Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street City State Zip Code Check one: Check one: | | | | Number Street |
| County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street City State Zip Code Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | | City State Zip Code |
| above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street Street | | | | County |
| City State Zip Code City State Zip Code City State Zip Code Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | above, fill it in here. Note that the court will send any | fill it in here. Note that the court will send any notices to |
| 6. Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | Number Street | Number Street |
| 6. Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | City State Zin Code | City State Zin Code |
| to file for bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | 6. | Why you are | ony oldre zip oode | |
| lived in this district longer than in any other district. | | choosing this district | | |
| Thave another reason. Explain. (See 28 U.S.C. §§ 1408.) | | to me for barne aproy | lived in this district longer than in any other district. | lived in this district longer than in any other district. |
| | | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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| De | ebtor 1 Lisa | Hicks | Ca | ase number <i>(if knov</i> | vn) | |
|-----|---|---|---|---|--|--|
| | First Name | Middle Name Last Name | | | | |
| Pa | rt 2: Tell the Court Abo | out Your Bankruptcy Case | | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, se Bankruptcy (Form B2010)). Also, go to the top Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | | luals Filing for |
| 8. | How you will pay the fee | ■ I will pay the entire fee when I file my more details about how you may pay. T cashier's check, or money order If you may pay with a credit card or check with I need to pay the fee in installments. It Individuals to Pay Your Filing Fee in Installments. It Individuals to Pay Your Filing Fee in Installments. It I request that my fee be waived (You judge may, but is not required to, waive the official poverty line that applies to you choose this option, you must fill our Form 103B) and file it with your petition | ypically, if you ur attorney is so a pre-printed f you choose the stallments (Office may request the your fee, and your family size at the Application. | are paying the ubmitting your laddress. this option, signicial Form 103/mis option only may do so only and you are un | n and attach the AAA). if you are filing for y if your income is nable to pay the fee | may pay with cash, behalf, your attorney application for r Chapter 7. By law, a less than 150% of the in installments). If |
| 9. | Have you filed for bankruptcy within the last 8 years? | No. ✓ Yes. District District District | When When | MM / DD / YYYY | Case number 15- | -bk-20816 |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | When | MM / DD / YYYY | Relationship to you Case number, if know Relationship to you Case number, if know | |
| 11. | Do you rent your residence? | ✓ No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction ✓ No. Go to line 12. ✓ Yes. Fill out <i>Initial Statement Abor</i> this bankruptcy petition. | | | | |

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? $\overline{\mathbf{v}}$ No. I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Lisa
 Hicks
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Lisa Hicks Signature of Debtor 1 Signature of Debtor 2 Executed on _ 12/27/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Lisa | | Hicks | Case number (if) | known) |
|--|----------------------------|-------------------------|---------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, o | or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the Iso certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 34 | 2(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | ormation in the sched | ules filed with the petition is incorrect. |
| attorney, you do not | | | | · |
| need to file this page. | /s/ Chris Prvor | | Date | 12/27/2016 |
| | Signature of Attorney for | or Debtor | M | M / DD / YYYY |
| | | | | |
| | | | | |
| | Chris Pryor | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Aver | nue | | |
| | Street | | | |
| | | | | |
| | · | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | cpryor@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Lisa | | Hicks | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| Case number (If known) | | | (State) | | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | · |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$6,774.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$6,774.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$12,124.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$82,163.00 |
| Your total liabilities | \$94,287.00 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,407.21 |
| | |
| i. Schedule J: Your Expenses (Official Form 106J) | \$2,400.00 |

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Hicks Debtor 1 Lisa __ Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,566.67 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$62,418.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$62,418.00

9g. Total. Add lines 9a through 9f.

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| Fill in the | informati | n to idoutif | | | | | | |
|---------------------------------------|--------------------------------------|---|---|--|---|-----------------------------------|---|---|
| FIII IN THIS | informatio | n to identify your c | ase: | | | | | |
| Debtor 1 | Lisa | t Name | NA: al alla N | I | Hicks | | | |
| Debtor 2 | FIIS | i Name | Middle N | vame | Last Name | | | |
| (Spouse, if fi | ling) First | Name | Middle N | Name | Last Name | | | |
| United Sta | ates Bankru | ptcy Court for the: | Northern | Dis | strict of Illinois (State) | | | |
| Case num | nber | | | | (State) | | | |
| Officia | al Form | 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule A | /B: Prope | erty | | | | | 12/1 |
| category v responsib write your | where you le for supp name and | think it fits best. I lying correct infor I case number (if I | Be as complete a mation. If more s known). Answer e | nd accurate a space is need every question | as possible. If two ma ed, attach a separate | rried people a sheet to this f | n one category, list the re filing together, both a orm. On the top of any a an Interest In | re equally |
| 1. Do you | own or ha | | quitable interest | in any residei | nce, building, land, or | similar proper | ty? | |
| H | Yes. When | e is the property? | | | | | | |
| 1.1 | Street add | ress, if available, or | other description | Single-fa | property? Check all thamily home | at apply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: nims Secured by Property. |
| | | | | <u> </u> | or multi-unit building ninium or cooperative | | Current value of the | Current value of the |
| | | | | | ctured or mobile home | | entire property? | portion you own? |
| | Number | Street | | Land | ent property | | Describe the nature o | f your ownership |
| | City | State | Zip Code | Timesha Other | | | interest (such as fee s the entireties, or a life | |
| | o.i.y | State | p | Who has an one. | interest in the prope | rty? Check | Check if this is co | mmunity property |
| | | | | Debtor 1 | only | | Ц | |
| | | | | Debtor 2 | only! | | | |
| | | | | | and Debtor 2 only | | | |
| | | | | | one of the debtors and | | | |
| | | | | | mation you wish to ad entification number <u>:</u> | d about this it | em, such as local | |
| If you | own or ha | ve more than one, l | ist here: | | | | | |
| 1.2 | | | | | property? Check all th | at apply. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2 | Street add | ress, if available, or | other description | | amily home or multi-unit building | | , | ims Secured by Property. |
| | | | | | ninium or cooperative | | Current value of the | Current value of the |
| | | | | Manufac | ctured or mobile home | | entire property? | portion you own? |
| | Number | Street | | Land | | | Describe the nature o | f vour ownership |
| | | | | Timesha | ent property ire | | interest (such as fee s the entireties, or a life | simple, tenancy by |
| | City | State | Zip Code | Other _ | | _ | | —————— |
| | | | | Who has an one. | interest in the prope | rty? Check | Check if this is co (see instructions) | mmunity property |
| | | | | Debtor 1 | only | | _ | |
| | | | | Debtor 2 | • | | | |
| | | | | | and Debtor 2 only | on oth or | | |
| | | | | ш | one of the debtors and | | | |
| | | | | | mation you wish to ad entification number: | about this it | em, such as local | |

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| Street address, if available, or other description Single-family home Duplex or multi-unit building Conditions Who Have Claims Secured Claims or Duplex or multi-unit building Current value of the entire property? Describe the nature of your owner interest (such as fee simple, tena the entire side of the entire side of the simple, tena the entire side of the entire side of the simple, tena the entire side of the entire side of the simple, tena the entire side of the entire side of the simple, tena the entire side of the entire side of the side of | Debtor 1 Lisa | Hicks Case nu | mber (if known) |
|---|--|---|--|
| Street address, if available, or other description | First Name Middle Name | e Last Name | |
| Number Street Investment property Describe the nature of your owner other Check if this is community property Check one. Chevrolet No Yes 2009 Approximate mileage: Approximate mileage: Approximate mileage: Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 one. Debtor 1 only Debtor 1 | | Single-family home Duplex or multi-unit building Condominium or cooperative | |
| Who has an interest in the property? Check one. [see instructions] Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | | Investment property Timeshare | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Describe Your Vehicles | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | (see instructions) |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Chevrolet Cruze Year: Approximate mileage: Other information: Debtor to Surrender Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Approximate mileage: Who has an interest in the property? Check one. Current value of the entire property? \$1750.00 Do not deduct secured claims or exiting property (see instructions) Current value of the entire property? \$1750.00 Do not deduct secured claims or exiting property (see instructions) Do not deduct secured claims or exiting amount of any secured claims or exiting amount of amount of any secured claims or exiting amount o | · | or all of your entries from Part 1, including any e | tries for pages |
| 3.1 Make | Do you own, lease, or have legal or equitable intergroup own that someone else drives. If you lease a vehical 3. Cars, vans, trucks, tractors, sport utility vehicles, more No | cle, also report it on Schedule G: Executory Contracts | • |
| Approximate mileage: 96000 Other information: Debtor to Surrender Debtor to Surrender Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Make Model: Year: Approximate mileage: Debtor 1 only Debtor 2 only Current value of the current value of the entire property? \$1750.00 \$1750.00 Do not deduct secured claims or extone. Oreditors Who Have Claims Secured. Current value of the current value of the entire property? \$1750.00 Current value of the cu | 3.1 Make Chevrolet Model: Cruze | one. | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> <i>Creditors Who Have Claims Secured by Property.</i> |
| instructions) 3.2 Make Model: Year: Approximate mileage: Who has an interest in the property? Check one. Do not deduct secured claims or exite amount of any secured claims or creditors who Have Claims Secured. Current value of the Curren | Other information: | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | entire property? portion you own? \$1750.00 \$1750.00 |
| Current value of the Current v | Model: Year: | Who has an interest in the property? Checone. | |
| At least one of the debtors and another Check if this is community property (see instructions) | Approximate mileage: Other information: | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | entire property? portion you own? |

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| | Lisa First Name | Middle Name | Hicks Case numb | | |
|------|---|-------------|---|---|---|
| 3.3 | Model: Year: | | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | claims or exemptions. I ured claims on Schedule aims Secured by Proper |
| | Approximate mileage: | | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | | At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | | |
| 3.4 | | | Who has an interest in the property? Check | Do not deduct secured | • |
| | Model: Year: | | one. Debtor 1 only | the amount of any secu Creditors Who Have Cla | |
| | Approximate mileage: | | = ' | | |
| | ,, | | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | | |
| Exam | nples: Boats, trailers, motors No Yes | • | ner recreational vehicles, other vehicles, and acc ft, fishing vessels, snowmobiles, motorcycle accesso | | |
| Exam | No Yes Make Model: | • | ft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. | Do not deduct secured the amount of any secu | ıred claims on <i>Schedui</i> |
| Exam | No Yes Make Model: Year: | • | th, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only | ries Do not deduct secured | red claims on <i>Schedul</i> |
| Exam | No Yes Make Model: | • | th, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on Schedulaims Secured by Proper Current value of the |
| Exam | No Yes Make Model: Year: | • | tt, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on <i>Schedul</i> aims Secured by Proper |
| Exam | No Yes Make Model: Year: Approximate mileage: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on Schedulaims Secured by Proper Current value of the |
| Exam | No Yes Make Model: Year: Approximate mileage: | • | tt, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on Schedul aims Secured by Proper Current value of the |
| Exam | No Yes Make Model: Year: Approximate mileage: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on Schedulaims Secured by Proper Current value of the portion you own? claims or exemptions. |
| Exam | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secured. | claims or Schedularims Secured by Proper Current value of the portion you own? claims or exemptions. |
| Exam | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on Schedulaims Secured by Proper Current value of the portion you own? claims or exemptions. I ured claims on Schedula |
| Exam | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured the amount of any secureditors Who Have Classification of the entire property? Do not deduct secured the amount of any secureditors Who Have Classification of the Current value of the | red claims on Schedulaims Secured by Proper Current value of the portion you own? claims or exemptions. ured claims on Schedulaims Secured by Proper Current value of the |
| Exam | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | Do not deduct secured the amount of any secured the amount of any secured the entire property? Do not deduct secured the amount of any secured the | claims or Schedule claims Secured by Proper current value of the portion you own? claims or exemptions. I |
| Exam | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured the amount of any secureditors Who Have Classification of the entire property? Do not deduct secured the amount of any secureditors Who Have Classification of the Current value of the | red claims on Schedulaims Secured by Proper Current value of the portion you own? claims or exemptions. ured claims on Schedulaims Secured by Proper Current value of the |
| Exam | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | Do not deduct secured the amount of any secureditors Who Have Classification of the entire property? Do not deduct secured the amount of any secureditors Who Have Classification of the Current value of the | red claims on Schedulaims Secured by Proper Current value of the portion you own? claims or exemptions. ured claims on Schedulaims Secured by Proper Current value of the |

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Hicks Debtor 1 Lisa Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Goods and furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used electronics \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1050.00 for Part 3. Write that number here

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$100.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Lisa | | Hicks | Case number (if known) | |
|------|---|--|---------------------------------|---|--|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instrumer | | ers' checks, promissory no | tes, and money orders. | |
| 0.4 | . | | | | |
| 21. | Retirement or pens Examples: Interests i | | B(b), thrift savings accounts | s, or other pension or profit-sharing plans | |
| | ✓ No | | | | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | sed deposits you have made so t ts with landlords, prepaid rent, pu | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental uni | t: | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contrac | et for a periodic payment of mone | y to you, either for life or fo | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Lisa First Name | Mi alalla | Hicks | Case number (if known) | |
|------|--|---|--|---|--|
| 24. | | Middle | Name Last Name count in a qualified ABLE program, or unde | er a qualified state tuition program | |
| 24. | | 530(b)(1), 529A(b), and 529 | | er a quanneu state tuition program. | |
| | ✓ No | | | | |
| | Yes | Institution name and descrip | otion. Separately file the records of any interes | sts.11 U.S.C. § 521(c): | |
| | _ | | | | |
| | | | | | |
| | | | | | |
| 25. | | | property (other than anything listed in line | e 1), and rights or powers | |
| | | or your benefit | | | |
| | ✓ No Yes. Desc | ribo | | | |
| | L Tes. Desc | ilbe | | | |
| 0.0 | | | | | |
| 26. | | = ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | secrets, and other intellectual property es, proceeds from royalties and licensing agre | ements | |
| | ✓ No | | | | |
| | Yes. Desc | ribe | | | |
| | _ | | | | |
| 27. | Licenses, frai | nchises, and other general | intangibles | | |
| | Examples: Bui | lding permits, exclusive licen | ses, cooperative association holdings, liquor | licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| | | | | | |
| Mor | ney or proper | ty owed to you? | | | Current value of the |
| Mor | ney or proper | ty owed to you? | | | portion you own? |
| Mor | ney or proper | ty owed to you? | | | |
| | ney or proper | | | | portion you own? Do not deduct secured |
| | Tax refunds ov | wed to you | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ov No Yes. Give s | wed to you specific information | Anticipated 2016 Tax Refund | Federal: | portion you own? Do not deduct secured |
| | Tax refunds ov No Yes. Give s abou you a | wed to you specific information t them, including whether already filed the returns | Anticipated 2016 Tax Refund | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ov No Yes. Give s abou you a | wed to you specific information t them, including whether | Anticipated 2016 Tax Refund | | portion you own? Do not deduct secured claims or exemptions. \$3874.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t | specific information t them, including whether already filed the returns the tax years | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | specific information t them, including whether already filed the returns the tax years | Anticipated 2016 Tax Refund spousal support, child support, maintenance, | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | wed to you specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, s | | State: Local: divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | specific information t them, including whether already filed the returns the tax years | | State: Local: divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 t \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | wed to you specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, s | | State: Local: divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | wed to you specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, s | | State: Local: divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 t \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | wed to you specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, s | | State: Local: divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s abou you a and t Family suppor Examples: Past | wed to you specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, s | | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$3874.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds over No No Yes. Give s about you a and to result of the No Yes. Give s About You a and to result of the No Yes. Give s Other amount | specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, s specific information | spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3874.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and t Family support Examples: Past No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years | | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3874.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds over No No Yes. Give so about you a and to the second Yes. Give so about you a and to the second Yes. Give so Other amount Examples: Unp Social No. | specific information t them, including whether already filed the returns he tax years | spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3874.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds over the second of | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, s specific information | spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3874.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Debt | tor 1 Lisa | Hicks | Case number (if known) | |
|------|---|---|--|---|
| | First Name Middle | e Name Last Name | · · · / | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance | ce; health savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died. | | cy, or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether o Examples: Accidents, employment dispute | | a demand for payment | |
| | No Yes. Describe | | | |
| 34. | Other contingent and unliquidated clai to set off claims | ms of every nature, including counter | claims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already | y list | | |
| | Ves. Describe | | | |
| 36. | Add the dollar value of all of your entrice for Part 4. Write that number here | | | \$3974.00 |
| | _ | | | |
| Part | Describe Any Business-Related | d Property You Own or Have an I | nterest In. List any real estate in Par | rt 1. |
| 37. | Do you own or have any legal or equita | ble interest in any business-related p | roperty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | Current value of the portion you own? Do not deduct secured claims |
| 38. | Accounts receivable or commissions yo | ou already earned | | or exemptions |
| | ✓ No Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplexamples: Business-related computers, so | | achines, rugs, telephones, desks, chairs, elec | ctronic devices |
| | No Yes. Describe | | | |
| | | | | |

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| Debt | tor 1 Lisa | Hicks | Case number (if known) | |
|--------------|---|--|---------------------------------|--|
| 40. | First Name Middle Nam Machinery, fixtures, equipment, supplies yo | | ır trade | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 41. | Inventory | | | |
| | I ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | | | |
| | | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | | | |
| | them | | | - |
| | | | | _ |
| | | | | |
| 43. (| Customer lists, mailing lists, or other compile | ations | | <u> </u> |
| | ✓ No | | | |
| | Yes. Do your lists include personally identif | iable information (as defined in 11 U. | S.C. § 101(41A))? | |
| | | | | |
| | No | | | |
| | Yes. Describe | | | · |
| 44. | Any business-related property you did not a | Iready list | | |
| | - No | | | |
| | No | | | |
| | Yes. Give specific information | | | |
| | inomaton | | | _ |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| | dd the dollar value of all of your entries from art 5. Write that number here | | | |
| <u> </u> | Describe Any Form and Commons | sial Fighing Palatad Pranarty | Vou Our or House on Interest In | |
| Part | 16: Describe Any Farm- and Commerce If you own or have an interest in farmland, list in | | You Own or Have an Interest in. | |
| 46. | Do you own or have any legal or equitable i | nterest in any farm- or commercia | al fishing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | Yes. Go to line 47. | | | portion you own? Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | | | |
| | Examples: Livestock, poultry, farm-raised fish | | | |
| | √ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |

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| Debt | tor 1 Lisa First Name | | icks ast Name | Case number (if known) | |
|--------------|----------------------------|--|------------------------|--------------------------------|-------------|
| 48. | | | | | |
| | ✓ No Yes. Describe | | | | |
| 49. | Farm and fishing equip | oment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing suppl | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and comme | rcial fishing-related property you did n | not already list | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | Γ | |
| | | I of your entries from Part 6, including here | | u have attached | |
| • | | | | L | |
| | | | | | |
| Part | 7: Describe All Pro | perty You Own or Have an Intere | st in That You Did Not | List Above | |
| 53. | | perty of any kind you did not already li | st? | | |
| | No No | s, country club membership | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | Lafa a sa a la Carlo de la Barta de la Maria de la | I a subsection | , | |
| 54. A | ad the dollar value of al | I of your entries from Part 7. Write tha | it number nere | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | 8: List the Totals of | Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | , line 2 | | > | |
| 56. r | oart 2 total vehicles, lin | e 5 | \$1750.00 | | |
| 57. P | art 3: Total personal an | d household items, line 15 | \$1050.00 | | |
| 58. P | art 4: Total financial as | sets, line 36 | \$3974.00 | | |
| 59. F | Part 5: Total business-re | elated property, line 45 | | | |
| 60. F | Part 6: Total farm- and f | ishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62. 1 | Total personal property. | Add lines 56 through 61 | \$6774.00 | | + \$6774.00 |
| | | | | Copy personal property total ▶ | |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | \$6774.00 |
| | | | | | |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | Lisa | | Hicks | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (State) | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Part 1: Identify the Property You Claim as Exempt | | | | | |
|----|--|---|---|------------------------------------|--|--|
| 1. | | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(2 | 2) | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| | Brief description: Chevrolet Cruze, 2009, Debtor to Surrender Line from Schedule A/B: 03 | \$1,750.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) | | |
| | Brief description: Goods and furniture Line from Schedule A/B: 06 | \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | |

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$500.00 description: **✓** \$500.00 Used clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$150.00 description: **✓** \$150.00 **Used electronics** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$100.00 description: **✓** \$100.00 Cash on hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(g)(1) Brief \$3,874.00 description: \$3,874.00 Federal, Anticipated 100% of fair market value, up to any 2016 Tax Refund

applicable statutory limit

Line from Schedule A/B:

28

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| | | Doc | ument Page 22 of 6 | 08 | | |
|---------------------------------|---|--|--|---|---|---------------------------------------|
| Fill in this info | ormation to identify your ca | se: | | | | |
| Debtor 1 | Lisa | | Hicks | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | | | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number | | | | | | |
| | Form 106D | | | | | Check if this is an amended filing |
| Sched | ule D: Credito | ors Who Hav | e Claims Secure | ed by Prop | ertv | 12/15 |
| name and case 1. Do any No. | s needed, copy the Additio se number (if known). creditors have claims se | nal Page, fill it out, numbecured by your property wit this form to the court wi | are filing together, both are equaler the entries, and attach it to t ? th your other schedules. You hav | his form. On the top | of any additional pag | |
| Part 1: Lis | t All Secured Claims | | | | | |
| separa | | an one creditor has a partic | red claim, list the creditor ular claim, list the other creditors der according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 CNAC/ | | Describe the property to | hat secures the claim: | \$12,124.00 | \$1,750.00 | \$10,374.00 |
| | r's Name STADIUM DR | 045 Automobile | | | | |
| Num | | | the claim is: Check all that apply. | | | |
| | | Contingent | | | | |
| KALAI | MAZOO MI 49008 | Unliquidated | | | | |
| City Who o | State ZIP Code wes the debt? Check one. | Disputed | | | | |
| _ | ebtor 1 only | Nature of lien. Check all | that apply. | | | |
| De | ebtor 2 only | An agreement you m car loan) | ade (such as mortgage or secured | | | |
| | ebtor 1 and Debtor 2 only | _ ′ | s tax lien, mechanic's lien) | | | |
| | least one of the debtors d another | Judgment lien from a | • | | | |
| ☐ CI | neck if this claim relates a community debt | Other (including a right | | | | |
| | lebt was <u>6/1/2016</u> | Last 4 digits of account | number6212 | | | |

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$12,124.00

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| Fill in this | s information to identify your | case: | | | |
|--|--|--|--|---|--|
| Debtor 1 | Lisa | | Hicks | _ | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | _ | |
| (Spouse, if | filing) First Name | Middle Name | Last Name | | |
| United S | tates Bankruptcy Court for the | e: Northern | District of Illinois | | |
| | | | (State) | _ | |
| Case nui | mber | | | _ | |
| | ol Form 106E/E | | | | Check if this is an amended filing |
| Officia | al Form 106E/F | | | | L ° |
| Sch | edule E/F: Cr | editors Who | Have Unsecu | red Claims | 12/15 |
| other par Form 106 claims th the entrick known). | rty to any executory contractions of the contraction of the contractio | cts or unexpired leases tha xecutory Contracts and Un creditors Who Hold Claim Attach the Continuation Pa | t could result in a claim. Also expired Leases (Official Form s Secured by Property. If more | list executory contracts 106G). Do not include an e space is needed, copy t | NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if |
| 1. Do | any creditors have priority | unsecured claims against y | ou? | | |
| ✓ | | | | | |
| | No. Go to Part 2. | | | | |
| 2. List | No. Go to Part 2. Yes. | | | | |

Total

claim

Priority

amount

Nonpriority

amount

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| Debto | 1 Lisa First Name | Middle Name | Hicks Last Name | Case number (it known) | | | |
|--------|--|--|--------------------|--|-------------|--|--|
| Part 2 | - | | | | | | |
| 3. Do | No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. | | | | | | |
| | igo or rait 2. | | | | Total claim | | |
| 4.1 | City Who incurred the debt? Ci Debtor 1 only | Nevada 891 State Zip | 02 Code | Last 4 digits of account number 6575 When was the debt incurred? 8/1/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | \$1,203.00 | | |
| | Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor Check if this claim relies the claim subject to offs No Yes | ors and another ates to a community de | ebt | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: COM ED - Other. Specify COMMONWEALTH EDISON | | | |
| 4.2 | City S Who incurred the debt? Ci ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor | only ors and another ates to a community de | Code | When was the debt incurred? 9/1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 2014 Chevrolet Cruze-Repossessed in June 2016 | \$11,895.00 | | |
| 4.3 | City S Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor | Florida 322 State Zip oneck one. only ors and another ates to a community de | Code | Last 4 digits of account number 3348 When was the debt incurred? 1/1/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: Other. Specify ERC/DIRECTV INC. | \$882.00 | | |

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Debtor 1 Lisa First Name Hicks Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim**

| 4.4 | I C SYSTEM INC | Last 4 digits of account number 9001 | \$1,315.00 |
|-----|--|---|------------|
| | Nonpriority Creditor's Name PO BOX 64378 | When was the debt incurred? 11/1/2012 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | SAINT PAUL Minnesota 55164 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | 불 | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other Specific OPICINAL OPERITOR: BON | |
| | ✓ No | Other. Specify ORIGINAL CREDITOR: RCN | |
| | Yes | | |
| 4.5 | Navient | Last 4 digits of account number 0801 | \$6,554.00 |
| | Nonpriority Creditor's Name 1002 ARTHUR DR | When was the debt incurred? 8/1/2007 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | LYNN HAVEN Florida 32444 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | Navient | Last 4 digits of account number 0912 | \$5,951.00 |
| | Nonpriority Creditor's Name 1002 ARTHUR DR | When was the debt incurred? 11/1/2004 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | LYNN HAVEN Florida 32444 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |

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Debtor 1 Lisa Hicks Case number (if known)
First Name Middle Name Last Name

| | Your NONPRIORITY Unsecured Claims - Continue After listing any entries on this page, number them beginning | - | Total claim |
|-----|--|---|-------------|
| | | ng with 4.5, followed by 4.6, and so forth. | |
| 4.7 | Navient Nonpriority Creditor's Name | Last 4 digits of account number0912 | \$3,293.00 |
| | 1002 ARTHUR DR | When was the debt incurred?11/1/2004 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | LYNN HAVEN Florida 32444 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ✓ Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.8 | Navient | Lock 4 divite of account number 0010 | \$2,926.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number 0912 | |
| | 1002 ARTHUR DR Number Street | When was the debt incurred? 6/1/2005 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | LYNN HAVEN Florida 32444 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | <u></u> | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ✓ Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.9 | Pangea | Lost 4 digits of account number | \$700.00 |
| | Nonpriority Creditor's Name 2231 E 71st St | Last 4 digits of account number When was the debt incurred? n/a | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60649 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts Rack ront-Case No. 15 M1 | |
| | Is the claim subject to offset? | Back rent-Case No. 15-M1-Other. Specify 709695 | |
| | ✓ No | | |
| | Yes | | |

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Peoples Gas \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 E. Randolph Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ Gas bill Is the claim subject to offset? **✓** No Yes PMO Chicago Holding \$2,250.00 4.11 Last 4 digits of account number _ Nonpriority Creditor's Name 1074 West Taylor Street; Suite 101 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60607 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Eviction-Case No. 16-M1-716496 Is the claim subject to offset? **✓** No Yes South Shore Apartments 4.12 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7447 S South Shore Dr n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60649 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Home repair charges

✓ No Yes

Is the claim subject to offset?

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** US DEPT OF ED/GLELSI 4.13 \$31,978.00 Last 4 digits of account number Nonpriority Creditor's Name 2401 INTERNATIONAL LN When was the debt incurred? 9/1/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON 53704 Wisconsin Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 US DEPT OF ED/GLELSI \$11,716.00 Last 4 digits of account number 0577 Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? 4/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset?

✓ No Yes Case 16-40434 Doc 1 Filed 12/27/16 Entered 12/27/16 17:52:51 Desc Main Document Page 29 of 68

| btor 1 Lisa | | | Hicks | Case number (if known) | | |
|-----------------------|--|------------------|--------------------|---|--|--|
| First Name | | Middle Name | Last Name | | | |
| rt 3: List Oth | ers to Be Notified A | About a Debt Tha | t You Already List | red | | |
| collection age | ollection agency is trying to collect from you for a debt ollection agency here. Similarly, if you have more than o | | | r, for a debt that you already listed in Parts 1 or 2. For example, if a one else, list the original creditor in Parts 1 or 2, then list the ny of the debts that you listed in Parts 1 or 2, list the additional debts in Parts 1 or 2, do not fill out or submit this page. | | |
| HUSBY MARV | /IN L III | | On which ent | try in Part 1 or Part 2 did you list the original creditor? | | |
| 852 W ARMIT | 2 W ARMITAGE | | | of (Check Part 1: Creditors with Priority Unsecured Claims | | |
| Number St | Number Street | | | one): Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Chicago | Illinois | 60614 | Last 4 digits of | of account number | | |
| City | State | Zip Code | Luot i digito (| | | |
| Jennifer Dean Name | | | On which ent | try in Part 1 or Part 2 did you list the original creditor? | | |
| 640 N Lasalle | # 638 | | Line 4.9 | of (Check Part 1: Creditors with Priority Unsecured Claims | | |
| Number St | treet | | | one): Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Chicago | Illinois | 60654 | l ast 4 digits (| of account number | | |
| City | State | Zip Code | | or adduct manipor | | |

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Debtor 1 Lisa Hicks Case number (if known)

| First Nan | ne Middle Name Last Name | | | | |
|--------------------------|--|-----|------------------------------------|--------------------|--|
| Part 4: Add th | e Amounts for Each Type of Unsecured Claim | | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | | tatistical reporting purposes only | y. 28 U.S.C. §159. | |
| | | | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | | |
| | | | Total claims | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$62,418.00 | | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$19,745.00 | | |
| | 6j. Total. Add lines 6f through 6j. | 6i. | \$82,163.00 | | |

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| Debtor 1 | Lisa | | Hicks |
|---------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | (Otato) |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | 50 | oamone ra | 90 02 01 00 | | |
|---------------------|-----------------------------|--|--------------------------|-------------------|--------------------------------------|------------------------------------|
| Fill in this info | ormation to identify your o | case: | | | | |
| Debtor 1 | Lisa | | Hicks | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number | | | (State) | | | |
| (If known) | | | | | | Chook if this is an |
| | | | | | | Check if this is an amended filing |
| Official | Form 106H | | | | | Ū |
| Official | 1 01111 10011 | | | | | |
| Schedu | le H: Your Cod | debtors | | | | 12/15 |
| | | | | | d accurate as possible. If two | |
| known). Answ | er every question. | ttach the Additional Page ou are filing a joint case, do | · · | | ional Pages, write your name | and case number (if |
| V No Yes | | ou are ming a joint case, uo | not list eliner spouse a | as a codebtor.) | | |
| | | | | • (0 " | | |
| | | xico, Puerto Rico, Texas, W | | | property states and territories incl | lude Arizona, California, |
| | Go to line 3. | ,, | J. J. , | - , | | |
| لنا ا | s. Did vour spouse, form | er spouse, or legal equiva | lent live with you at th | ne time? | | |
| | No | | | | | |
| 범 | - | ty state or territory did you | ı live? | Fill in the n | ame and current address of that | t nerson |
| ш | roo. III Willom oomiinanii | ty diate of territory dia yet | | | arre and current address of that | r poison. |
| | Name of your spouse. | former spouse, or legal equ | ivalent | | | |
| | | | | | | |
| | Number Street | | | | | |
| | City | State | Zip | Code | | |
| | | | · | | | |
| 3. In Colum | nn 1, list all of your code | btors. Do not include you | r spouse as a codebt | or if your spouse | is filing with you. List the pers | son shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | - | | | _ | | |
|--|--|------------------------------------|--|-------------------------------------|---|------------------------|
| Fill in this information to identify | your case: | | | | | |
| Debtor 1 Lisa | | Hicks | | | | |
| First Name | Middle Name | Last Nam | ie . | Che | eck if this is: | |
| Debtor 2 (Spouse, if filing) First Name | Mindala Nama | I ant Niam | | | An amended filing | |
| (Spouse, II IIIIII) First Name | Middle Name | Last Nam | ie | | A supplement showing po | act potition chapter 1 |
| United States Bankruptcy Court for | Northern | _ District of Illinoi | | | expenses as of the following | |
| the: Case number | | (State | e) | | • | |
| (If known) | | | | | MM / DD / YYYY | |
| Official Form 106I | | | | | | |
| Schedule I: Your In | come | | | | | 12/1 |
| responsible for supplying correctinformation about your spouse. If spouse. If more space is needed number (if known). Answer ever Part 1: Describe Employment | If you are separated and d, attach a separate she y question. | d your spouse | is not filing wi | th you, do | not include information | n about your |
| Fill in your employment | | Debtor 1 | | | Debtor 2 | |
| information. | Employment status | | | | | |
| If you have more than one job, | Linployment status | Employed | | | Employed | |
| attach a separate page with information about additional | | Not Empl | oyea | | Not Employed | |
| employers. | Occupation | | | | | |
| Include part time, seasonal, or | Employer's name | BMA of Illinoi | IS | | | |
| self-employed work. | Employer's address | 920 Winter St | t | | | |
| Occupation may include student or homemaker, if it applies. | | Number Street | | | Number Street | |
| | | | | | | |
| | | | | | | |
| | | Waltham | Massachuse (| 02451 | City | tate Zin Code |
| | | Waltham City | tts | 02451 Zip Code | City S | tate Zip Code |
| | How long employed there? | | tts | | _ City S | tate Zip Code |
| | How long employed there? | | tts | | City S | tate Zip Code |
| Part 2: Give Details About M | there? | | tts | | _ City S | tate Zip Code |
| | there? Monthly Income | City | tts State | Zip Code | <u> </u> | |
| Estimate monthly income as of | there? Monthly Income | City | tts State | Zip Code | <u> </u> | |
| | there? Monthly Income the date you file this form re more than one employer, | City n. If you have no | tts State thing to report fo | Zip Code or any line, v | write \$0 in the space. Inclu | ude your non-filing |
| Estimate monthly income as of a spouse unless you are separated. If you or your non-filing spouse hav | there? Monthly Income the date you file this form re more than one employer, | City n. If you have no | tts State thing to report fo | Zip Code or any line, v | write \$0 in the space. Inclure that person on the lines For Debtor 2 or | ude your non-filing |
| Estimate monthly income as of spouse unless you are separated. If you or your non-filing spouse hav | there? Monthly Income the date you file this form the more than one employer, the to this form. ary, and commissions (before) | n. If you have no combine the info | tts State thing to report for all e | Zip Code or any line, v | write \$0 in the space. Inclu | ude your non-filing |
| Estimate monthly income as of a spouse unless you are separated. If you or your non-filing spouse have more space, attach a separate sheet. 2. List monthly gross wages, saladeductions.) If not paid monthly | there? Monthly Income the date you file this form re more than one employer, ret to this form. ary, and commissions (before, real calculate what the monthly recommissions) | n. If you have no combine the info | tts State thing to report for all e For Debt | Zip Code or any line, v mployers fo | write \$0 in the space. Inclure that person on the lines For Debtor 2 or | ude your non-filing |

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| Debtor 1Lisa First Name Mic | Hicks ddle Name Last Nam | 10 | Case number | (if | | |
|--|--|----------|----------------------------|-----------------------------------|-------|------------------------|
| Thist realite with | due Haine Last Main | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Copy line 4 here | → | 4. | \$3,052.16 | | | |
| 5. List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Social Security | deductions | 5a. | \$588.58 | | | |
| 5b. Mandatory contributions for retiren | nent plans | 5b. | \$0.00 | | | |
| 5c. Voluntary contributions for retireme | ent plans | 5c. | \$0.00 | | | |
| 5d. Required repayments of retirement | fund loans | 5d. | \$0.00 | | | |
| 5e. Insurance | | 5e. | \$256.38 | | | |
| 5f. Domestic support obligations | | 5f. | \$0.00 | | | |
| 5g. Union dues | | 5g. | \$0.00 | | | |
| 5h. Other deductions. Specify: | | 5h | + \$0.00 + | | | |
| 6. Add the payroll deductions. Add lines 5a+5h. | + 5b + 5c + 5d + 5e +5f + 5g | 6. | \$844.96 | | | |
| 7. Calculate total monthly take-home pay | . Subtract line 6 from line 4. | 7. | \$2,207.21 | | | |
| 8. List all other income regularly received | : | | | | | |
| 8a. Net income from rental property an business, profession, or farm | | | | | | |
| Attach a statement for each property a gross receipts, ordinary and necessary | | | | | | |
| the total monthly net income. | | 8a. | <u>\$0.00</u> | | | |
| 8b. Interest and dividends | | 8b. | <u>\$0.00</u> | | | |
| 8c. Family support payments that you, dependent regularly receive | | | | | | |
| Include alimony, spousal support, chil divorce settlement, and property settle | | 8c. | \$200.00 | | | |
| 8d. Unemployment compensation | | 8d. | <u>\$0.00</u> | | | |
| 8e. Social Security | | 8e. | \$0.00 | | | |
| 8f. Other government assistance that y Include cash assistance and the value cash assistance that you receive, such under the Supplemental Nutrition Assis housing subsidies Specify: | (if known) of any non- as food stamps (benefits | 8f. | \$0.00 | | | |
| 8g. Pension or retirement income | | 8g. | \$0.00 | | | |
| 8h. Other monthly income. Specify: | | 8h | + \$0.00 + | | | |
| 9. Add all other income Add lines 8a + 8b + | 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$200.00 | |] | |
| 10. Calculate monthly income. Add line 7 + Add the entries in line 10 for Debtor 1 and | | 10. | \$2,407.21 + | | = | \$2,407.21 |
| State all other regular contributions to Include contributions from an unmarried p friends or relatives. Do not include any amounts already include | eartner, members of your househ | old, you | ur dependents, your roomma | | | |
| Specify: | | | | | 11. + | \$0.00 |
| 12. Add the amount in the last column of Write that amount on the Summary of Sch | | | | | 12. | \$2,407.21 Combined |
| 13. Do you expect an increase or decrease | e within the year after you file | this fo | rm? | | | monthly income |
| Yes. Explain: | | | | | | |

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| | | 200 | ament rage co or o | J | | |
|------------------------------------|--|--|---|-------------------|-------------------------|--------------------|
| Fill in this infor | mation to identify yo | ur case: | | | | |
| Debtor 1 | Lisa | | Hicks | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng | |
| | Bankruptcy Court for t | | District of Illinois | | howing post-pe | etition chapter 13 |
| Case number | | | (State) | | 3 · · | |
| (If known) | | | | MM / DD / YYY | Y | |
| Official | Form 106 | <u>J</u> | | | | |
| Schedul | e J: Your Ex | cpenses | | | | 12/15 |
| information. If (if known). Ans | | ed, attach another sheet to thi | are filing together, both are equal s form. On the top of any addition | | | number |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| | oes Debtor 2 live in | a separate household? | | | | |
| | No | | | | | |
| Г | Yes. Debtor 2 mus | st file Official Forms 106J-2, Expe | enses for Separate Household of Deb | tor 2. | | |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does deper with you? | ndent live |
| | | *************************************** | Child | 4 years | No. | |
| | | | | | ✓ Yes. | |
| | | | Relative | 19 years | No. | |
| | | | | | Yes. | |
| | | | Relative | 25 years | No. | |
| 0. D | | | | | ✓ Yes. | |
| | penses include f people other | No | | | | |
| yourself an dependents | | Yes | | | | |
| Part 2: Esti | mate Your Ongoir | ng Monthly Expenses | | | | |
| - | of a date after the ba | | you are using this form as a supp pplemental Schedule J, check th | - | | |
| | | n-cash government assistance ed it on <i>Schedule I: Your Incom</i> | | | Y | our expenses |
| | l or home ownership or the ground or lot. 4 | | nclude first mortgage payments and | | 4. | \$0.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, or | renter's insurance | | | 4b. | \$0.00 |

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Lisa Hicks Case number (if known)
First Name Middle Name Last Name

| First Name who will be Last Name | | |
|---|-----|---------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$350.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$50.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$150.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$700.00 |
| 8. Childcare and children's education costs | 8. | \$340.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$120.00 |
| 10. Personal care products and services | 10. | \$100.00 |
| 11. Medical and dental expenses | 11. | \$90.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$350.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$150.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | 10 | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$0.00 |
| 19. Other payments you make to support others who do not live with you. | 10. | |
| Specify: | 19. | \$0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 Lisa | | | Hicks | Case number (if known) | | |
|---------------|--------------------------|-----------------------------|--|------------------------|-----|------------|
| First | Name | Middle Name | Last Name | | | |
| 21.Other. Spe | ecify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calculate | your monthly expens | | | \$2,400.00 | | |
| 22a. Add li | nes 4 through 21. | | \$0.00 | | | |
| 22b. Copy | line 22 (monthly exper | | \$2,400.00 | | | |
| 22c. Add li | ne 22a and 22b. The r | esult is your monthly exp | enses. | | 22. | |
| 23. Calculate | your monthly net inc | ome. | | | | |
| 23a. Copy | line 12 (your combined | d monthly income) from S | Schedule I. | | 23a | \$2,407.21 |
| 23b. Copy | your monthly expense | es from line 22 above. | | | 23b | \$2,400.00 |
| | , , , | nses from your monthly in | ncome. | | | \$7.21 |
| The r | esult is your monthly n | et income. | | | 23c | |
| For exam | ole, do you expect to fi | nish paying for your car le | ses within the year after pan within the year or do y nodification to the terms of | ou expect your | | |

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| Fill in this information to identify your case: | | | | | | | | | |
|---|------------|-------------|------------------------------|--|--|--|--|--|--|
| Debtor 1 | Lisa | Hicks | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | | | | |
| Case number (If known) | | _ | | | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Lisa Hicks | x |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 12/27/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in this info | rmation to identify your | case: | | | | | |
|---------------------------------|--|--------------------------------|---|-------------------|----------|----------|---------------------------------------|
| Debtor 1 | Lisa | | Hicks | | | | |
| Dobtor 1 | First Name | Middle N | | e | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle N | lame Last Nam | <u> </u> | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illino | is | | | |
| Case number | | | (Stat | e) | | | |
| (If known) | | | | | | | Check if this is a |
| Official | Form 107 | | | | | | amended filing |
| Stateme | ent of Financia | al Affairs f | or Individuals | Filing for | Bankru | ntcv | 12/1 |
| information. number (if kr | If more space is need nown). Answer every o | ed, attach a sepa Juestion. | arried people are filing a arate sheet to this form and Where You Lived | . On the top of a | | | |
| | s your current marital st | | and where rou lived | beiore | | | |
| | | .atus: | | | | | |
| | arried ot married | | | | | | |
| ت. | | | other than where you liv | | | | |
| | | ou lived in the last | 3 years. Do not include v | where you live no | w. | | Dates Debtor 2 lived there |
| | | | there | | | | <u></u> |
| | | | | Same as D | Debtor 1 | | Same as Debtor 1 |
| | 21 S. Paxton Street mber Street | | From | Number Street | | | From |
| <u>1</u> E | | | То | | | | To |
| | icago Illinois | 60649 | | 0'' | 0 | | |
| Cit | y State | Zip Code | | City Same as D | State | Zip Code | Same as Debtor 1 |
| | | | | came as E | obtor 1 | | Carrie as Desici 1 |
| Nu | mber Street | | From | Number Street | | | From |
| | | | То | | | | To |
| Cit | y State | Zip Code | | City | State | Zip Code | |
| | | | | - | | | · · · · · · · · · · · · · · · · · · · |
| | | - | ouse or legal equivalent iana, Nevada, New Mexico, | | | | |
| ✓ No | | | | | | | |
| | Make sure you fill out S | Schedule H: Your | Codebtors (Official Form | 106H). | | | |

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$37000.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$20000.00 Wages, For last calendar year: commissions, commissions, 2015 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$10000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. YTD Child Support \$2,400.00 From January 1 of current year until the date you filed for bankruptcy: Est. 2015 Child For last calendar year: \$1,200.00 Support (January 1 to December 31, 2015 For the calendar year before that: (January 1 to December 31, 2014

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Hicks Debtor 1 Lisa Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| or 1 | Lisa | | | Hic | ks | Case number | (if known) |
|----------------------|--|---|---|--|--|---|--|
| | First Name | | Middle Name | Las | t Name | | |
| nsic corp ager | ders include your orations of whicl | relatives; and you are and for a busing | ny general partners n officer, director, p ess you operate as | ; relatives of any person in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? ou are a general partner; securities; and any managing domestic support obligations, |
| V | No | | | | | | |
| Ħ | Yes. List all pay | ments to a | ın insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| , | Insider's Name | | | | | | |
| , | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| • | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| insid Inclu | der? de payments on | debts gua | ranteed or cosigne | d by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | module creditor's name |
| | insider 5 Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| _ | City | State | Zip Code | | | | |
| _ | City Insider's Name | State | Zip Code | | | | |
| | - | State | Zip Code | | | | |

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Hicks Debtor 1 Lisa Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title **Eviction Procedings** Circuit Court of Cook County, Illinois Pending PMO Chicago Holdings v. Lisa Hicks Court Name On appeal 5600 Old Orchard Road **NumberStreet** Concluded Case number 60077 Skokie Illinois 16-M1-716496 City State Zip Code Case title **Eviction Proceedings** Pending Circuit Court of Cook County, Illinois Pangea v. Lisa Hicks Court Name On appeal 5600 Old Orchard Road Case number NumberStreet Concluded 15-M1-709695 Skokie Illinois 60077 City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2014 Chevy Cruze-Repossessed June 2016 \$0 ALLY FINANCIAL Creditor's Name Explain what happened 200 RENAISSANCE CTR Number Street Property was repossessed. Property was foreclosed. Michigan **DETROIT** 48243 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Lisa | Hicks | Case number (if known) | |
|------|---|----------------------------|---|------------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you No | | pank or financial institution, set off any am | ounts from your |
| | Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | - |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was an appointed receiver, a custodian, or another official? | | possession of an assignee for the benefit of | of creditors, a court- |
| | V No V ⋅ | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did y | ou give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | - |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| Hicks C | ase number (if known) | |
|---|---|--|
| ame Last Name | · / | |
| | | |
| ptcy, did you give any gifts or contributions w | ith a total value of more than \$60 | 0 to any charity? |
| | | |
| contribution | | |
| | | |
| Describe what you contributed | | Value |
| | contributed | |
| | | - |
| | | |
| | | |
| | | |
| | | |
| Pada . | | |
| ode | | |
| | | |
| | | |
| | | |
| Describe any insurance coverage | e for the loss Date of your | Value of property |
| | | lost |
| | 3 of Schedule | |
| A/B: Property. | | |
| | | |
| | | |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services | | o anyone you consult |
| tcy, did you or anyone else acting on your bel bankruptcy petition? | | o anyone you consult |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services | required in your bankruptcy. | |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any pro | required in your bankruptcy. perty Date paymen | t Amount of |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services | required in your bankruptcy. Date paymen or transfer | |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any pro | required in your bankruptcy. Date paymen or transfer | t Amount of |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| tcy, did you or anyone else acting on your bel bankruptcy petition? eparers, or credit counseling agencies for services Description and value of any protransferred Attorney's Fee - 0.00 | required in your bankruptcy. Date paymen or transfer was made | t Amount of payment |
| | Describe any insurance coverage Include the amount that insurance pending insurance claims on line 3 A/B: Property. | ptcy, did you give any gifts or contributions with a total value of more than \$60 contribution. Describe what you contributed Date you contributed code tcy or since you filed for bankruptcy, did you lose anything because of theft, fired Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Date of your loss |

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| Debt | or 1 | Lisa | | | Case number (if known) | | |
|------|----------|---|-------------|---|-------------------------------------|--|---------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | you deal with your cre | | you or anyone else acting on your be nents to your creditors? on line 16. | half pay or transfer | any property to ar | nyone who promised to |
| | Ħ | Yes. Fill in the details. | | | | | |
| | Ш | res. I ill ill the details. | | | | | |
| | | | | Description and value of any pro transferred | репту | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | - | | | |
| | | Number Street | | - | | | |
| | | | | - | | | |
| | | City Stat | te Zip Code | - | | | |
| | ✓ | No Yes. Fill in the details. | | Description and value of any property transferred | Describe any payments rein exchange | r property or ceived or debts pa | Date id transfer was made |
| | | Person Who Received 1 | Transfer | - | | | |
| | | Number Street | | - | | | |
| | | City Stat Person's relationship to | | - | | | |
| | | Person Who Received 1 | Transfer | - | | | |
| | | Number Street | | - | | | |
| | | - | | - | | | |
| | | City Stat Person's relationship to | | - | | | |
| 19. | ben | hin 10 years before you eficiary? ese are often called asset No Yes. Fill in the details. | | id you transfer any property to a self- | settled trust or simi | ilar device of whic | h you are a |
| | Ш | . 56. i iii ii ii ii ii did dotallo. | | December 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | Det |
| | | | | Description and value of the pr | operty transferred | | Date transfer was made |
| | | Name of trust | | | | | |

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Hicks Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Hicks Debtor 1 Lisa Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | tor 1 | | | | Hicks | Case n | iumber <i>(if k</i> | nown) | | |
|------|----------|----------------------|----------------|--------------------|-----------------------------|---------------------------|---------------------|--------------|------------------------------------|--------------------------------|
| | | First Name | | Middle Name | Last Name | | | | | |
| 26. | | No | | cial or administra | ative proceeding under | r any environmental | l law? Inc | lude settlen | nents and orde | ers. |
| | | Yes. Fill in the det | ails. | | | | | | | |
| | | | | 1 | Court or agency | | Nature of | the case | | Status of the case |
| | | Case title | | | | | | | | Pending |
| | | | | | Court Name | | | | | On appeal |
| | | Case number | | | NumberStreet | | | | | Concluded |
| | | | | į | City State | Zip Code | | | | |
| Part | 11: | Give Details Ab | oout Your E | Business or Co | nnections to Any Bu | usiness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | you own a business or | have any of the foll | lowing co | nnections to | o any business | ? |
| | | ☐ A sole propri | etor or self-e | emploved in a tra | ide, profession, or othe | er activitv. either full- | time or pa | art-time | | |
| | | | | | LC) or limited liability pa | = | | - | | |
| | | A partner in a | | | | (——·) | | | | |
| | | | | | e of a corporation | | | | | |
| | | _ | | | quity securities of a cor | rocration | | | | |
| | | An owner or a | at least 570 C | or the voting or e | quity securities or a cor | poration | | | | |
| | V | No. None of the a | above applie | s. Go to Part 12. | | | | | | |
| | П | Yes. Check all tha | at apply abo | ve and fill in the | details below for each l | business. | | | | |
| | | | | | | ure of the business | | Employer Id | dentification n | umber Do not |
| | | | | | | | | | | umber or ITIN. |
| | | | | | | | | EIN: | | |
| | | Business Name | | | | | | | | |
| | | Number Street | | | _ | | | Dates busin | ness existed | |
| | | City | State | Zip Code | Name of account | tant or bookkeeper | | F | т. | |
| | | City | Oldio | Z.Ip 0000 | | | | From | То | |
| | | | | | Describe the nat | ure of the business | | | dentification n | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | | | | _ | | | | | |
| | | Number Street | | | Name of account | tant or bookkeeper | | Dates busin | ness existed | |
| | | City | State | Zip Code | | | | From | To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Describe the nat | ure of the business | | | dentification n cial Security n | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | | | | _ | | | | | |
| | | Number Street | | | Name of account | tant or bookkeeper | | Dates busir | ness existed | |
| | | City | State | Zip Code | _ | | | From | To | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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| Deb | tor 1 Lisa | | Hicks | Case number (if known) |
|------|--|----------------------------|-------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | Within 2 years before you creditors, or other parties. | | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | Yes. Fill in the details b | pelow. | | |
| | _ | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Name | | | |
| | Number Street | | _ | |
| | City St | ate Zip Code | _ | |
| | , | · | | |
| Part | 12: Sign Below | | | |
| t | true and correct. I understa | nd that making a false sta | tement, concealing prope | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /s/ Lisa | | | <u> </u> |
| | Signature of | f Debtor 1 | | Signature of Debtor 2 |
| | Date 12/27 | /2016 | | Date |
| ı | Did you attach additional pa | ages to Your Statement of | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| ı | ✓ No | | | |
| Ī | Yes | | | |
| ı | Did you pay or agree to pay | someone who is not an at | torney to help you fill out b | ankruptcy forms? |
| [| ✓ No | | | |
| [| Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this infor | mation to identify your c | ase: | | | | |
|---------------------------|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Lisa | | Hicks | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (State) | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: CNAC/MI105 Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 045 Automobile Retain the property and [explain]: Surrender the property. Creditor's No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debtor | Lisa | | Hicks | Case number (if | |
|-----------------|--|--|--|---|---|
| 1 | First Name | Middle Name | Last Name | known) | • |
| Part 2: | List Your Unexpired Pe | ersonal Property Leas | es | | |
| For any informa | unexpired personal proper | ty lease that you listed i estate leases. Unexpired | n Schedule G: Executo d leases are leases tha | ory Contracts and Unexpired Leases (Official Form 106G), fill in the at are still in effect; the lease period has not yet ended. You may 11 U.S.C. § 365(p)(2). | |
| Des | scribe your unexpired perso | onal property leases | | Will the lease be assumed? | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | _ | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | _ | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | _ | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | _ | |
| Part 3: | Sign Below | | | | |
| | er penalty of perjury, I decla erty that is subject to an u | | my intention about an | ny property of my estate that secures a debt and any personal | |
| | /s/ Lisa Hicks | | x _ | | |
| Si | gnature of Debtor 1 | | S | Signature of Debtor 1 | |
| D | ate 12/27/2016 MM/DD/YYYY | | D | Date MM/DD/YYYY | |

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Lisa Hicks | Northern Bio | | ase No. | |
|-------------|---|-----------------------------------|---------------------------|------------------|------------------------------|
| | Debtor | | O | | (If known) |
| | | | С | hapter | Chapter 7 |
| DI | ISCLOSURE OF | COMPENSATI | ON OF ATTO | RNEY F | OR DEBTOR |
| comper | nt to 11 U.S.C. § 329(a) and Formation paid to me within one you or to be rendered on behalf of | year before the filing of t | he petition in bankrupto | cy, or agreed to | |
| For lega | al services, I have agreed to ac | cept | | | \$1,465.00 |
| Prior to | the filing of this statement I h | ave received | | | \$0.00 |
| Balance | e Due | | | | \$1,465.00 |
| 2. The sou | urce of the compensation paid | to me was: | | | |
| | ✓ Debtor | Other (spec | sify) | | |
| 3. The sou | urce of the compensation paid | to me is: | | | |
| | ✓ Debtor | Other (spec | sify) | | |
| 4. I ha | ave not agreed to share the abo mbers and associates of my la | ove-disclosed compensa w firm. | ation with any other pers | son unless the | ey are |
| └ me | ave agreed to share the above- mbers or associates of my law people sharing in the comper | firm. A copy of the agre | | | |
| a. | n for the above-disclosed fee, Analysis of the debtor's finand bankruptcy; | | | | |
| b. | Preparation and filing of any p | etition, schedules, state | ements of affairs and pla | n which may b | pe required; |
| C. | Representation of the debtor | at the meeting of credito | rs and confirmation hea | ring, and any a | adjourned hearings thereof; |
| 6. By agre | ement with the debtor(s), the a | above-disclosed fee doe | s not include the follow | ng services: | |
| | | | | | |
| | | CERTII | FICATION | | |
| | nat the foregoing is a complete his bankruptcy proceedings. | e statement of any agree | ment or arrangement fo | r payment to n | ne for representation of the |
| | 12/27/2016 | | /s/ Chris | Pryor | |
| | Date | | Signature of | Attorney | |
| | | | Semrad La | w Firm | |
| | - - | | Name of la | aw firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | filing fee administrative fee |
|---|----------|----------------------------------|
| + | <u> </u> | |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Hicks, Lisa | Case No | |
|-----------------|--|--|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter7 |
| | VERIFICA | ATION OF CREDITOR MAT | ΓRIX |
| Th knowledge | he above named Debtors hereby verify t e. | hat the attached list of creditors is tr | rue and correct to the best of their |
| Date: | 12/27/2016 | /s/ Hicks, Lisa Hicks, Lisa Signature of Del | |

US DEPT OF ED/GLELSI 2401 INTERNATIONAL LN MADISON , 53704

CNAC/MI105 3718 STADIUM DR KALAMAZOO , 49008

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT , 48243

Navient 1002 ARTHUR DR LYNN HAVEN , 32444

I C SYSTEM INC PO BOX 64378 SAINT PAUL , 55164

AARGON COLLECTION AGEN 3160 S VALLEY VW STE 206 LAS VEGAS, 89102

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , 32256

PMO Chicago Holding 1074 West Taylor Street; Suite 101 Chicago , 60607

HUSBY MARVIN L III 852 W ARMITAGE Chicago , 60614

Peoples Gas 200 E. Randolph Chicago , 60601

Pangea 2231 E 71st St Chicago , 60649 Jennifer Dean 640 N Lasalle # 638 Chicago , 60654

South Shore Apartments 7447 S South Shore Dr Chicago , 60649

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 12/27/16

CIIGIII

Attorney

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| Debtor 1 Lisa First Name | Hick Middle Name Last | ks Case numb | et (if known) |
|---|---|---|--|
| | estions for Reporting Purposes | Name | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily co "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bu | rimarily for a personal, family, or usiness debts? Business debts? Business debts estment or through the operation. | are debts that you incurred to obtain on of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fund. No. | | mpt property is excluded and administrative unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 millio \$100,000,001-\$500 mil | n \$1,000,000,001-\$10 billion on \$10,000,000,001-\$50 billion |
| ^{20.} How much do you estimate your liabilities to be? | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 millio \$100,000,001-\$500 mil | n \$1,000,000,001-\$10 billion on \$10,000,000,001-\$50 billion |
| Part 7: Sign Below | | | |
| · | correct. If I have chosen to file under Chap of title 11, United States Code. I us under Chapter 7. If no attorney represents me and I o out this document, I have obtained | ter 7, I am aware that I may produced and the relief available understand the relief available understand pay or agree to pay some and read the notice required b | that the information provided is true and seed, if eligible, under Chapter 7, 11,12, or 13 ader each chapter, and I choose to proceed seone who is not an attorney to help me fill y 11 U.S.C. § 342(b). |
| | connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151 | e can result in fines up to \$250, | taining money or property by fraud in 000, or imprisonment for up to 20 years, or |
| | /s/ Lisa Hicks And /s Signature of Debtor 1 | | ature of Debtor 2 |
| | Executed on12/27/2016MM / DD / Y | | cuted on |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|
| Debtor 1 | Lisa | | Hicks | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | |
| Case number (If known) | | | | | | | | |

Official Form 106Dec

| 7 | Check | if | this | is | ar |
|---|-------|----|---------|----|----|
| | amend | e | d filir | าต | |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT an attor | ney to help you fill out bankruptcy forms? |
| ☑ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read the su that they are true and correct. | mmary and schedules filed with this declaration and |
| * /s/ Lisa Hicks Luz / | * |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 12/27/2016 | Date |
| MM/DD/YYYY | IVIIVI/DD/1111 |

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| Debtor | 1 Lisa | | Hicks | Case number (if known) |
|---|--|-----------------------------|----------------------------|--|
| · · · - /// / / / / / / / / / / / / / / | First Name | Middle Name | Last Name | ANNA MANAGEMENT STORMAN STORMA |
| | fithin 2 years before you f reditors, or other parties. | | ou give a financial stater | nent to anyone about your business? Include all financial institutions, |
| Ē | No Yes. Fill in the details b | elow | | |
| L | 1 700.1 11.11.11.11.10 4004110 10 | 0.011 | Date issued | |
| | | | Date Issueu | |
| | Name | | MM/DD/YYYY | |
| | | | , | · |
| | Number Street | | | |
| | City Sta | ate Zip Code | | |
| | City Sta | ate Zip Code | | , |
| Part 12 | Sign Below | | | |
| | | t in fines up to \$250,000, | | perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of | | | Signature of Debtor 2 |
| | Date 12/27/2 | 2016 | | Date |
| Did | you attach additional pa | ges to Your Statement of | Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| [Z] | No | | | |
| Ö | Yes | | | |
| Did | you pay or agree to pay s | someone who is not an a | torney to help you fill ou | t bankruptcy forms? |
| | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debtor Lisa | | Η | cks | Case number (if | |
|--------------------------|--|---|--|--|--|
| 1 First Na | me Midd | le Name La | st Name | known) | |
| Part 2: List You | r Unexpired Personal Pr | operty Leases | | | |
| information below | | ses. Unexpired leases | are leases that are | still in effect; the lease p | ases (Official Form 106G), fill in the eriod has not yet ended. You may |
| Describe you | r unexpired personal proper | ty leases | | Will | the lease be assumed? |
| Lessor's name | × . | | | , laund | No . Yes |
| Description of property: | leased | er fir fir fathelis, blitch steining filmmennen is seining film film handling seining seining seining seining | AAN AAN WAARIIN II MIIRII MIIRII MAARAA AAN AA | en Alemania (h. 1919). Alemas e eta Lucius en Alemania | |
| Lessor's name | | etter i 1863 desen delskar det i Samentoldadek ar 1897 storet i 1980e i der veneren er game | ones en el minimo de respecto de la constante en el mente de la constante de la constante de la constante de l | laura l | No Yes |
| Description of property: | | | | | |
| Lessor's name | | | | lead . | No Yes |
| Description of property: | leased | | | Encod | |
| Lessor's name | | | | | No /es |
| Description of property: | leased | | | | |
| Lessor's name | | | | in the second | No /es |
| Description of property: | eased | | | - | |
| Lessor's name | : | | S | ᇤ. | √es |
| Description of property: | eased | | AM. E. YO | | |
| Lessor's name | | en e | | | No Yes |
| Description of property: | | | . , , , , , , , , , , , , , , , , , , , | · | |
| art 3: Sign Bel | | | | | to the second responsible to the second responsibility to the second respo |
| | of perjury, I declare that I ha subject to an unexpired lea | | ntion about any prope | erty of my estate that see | cures a debt and any personal |
| /s/ Lisa Hid | | 3 | ★ Signatun | e of Debtor 1 | |
| Date 12/27/ | | | Date | M/DD/YYYY | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Hicks, Lisa | Case No | |
|-----------------|-------------|--|--------------------------------------|
| | Debtor(s) | Odse NO. | |
| | | Chapter. | Chapter7 |
| | VERIFI | CATION OF CREDITOR MAT | TRIX |
| TI knowledge | | y that the attached list of creditors is to | rue and correct to the best of their |
| Date: | 12/27/2016 | /s/ Hicks, Lisa Hicks, Lisa Signature of Del | An A |

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| Debtor 1 | Lisa First Name | Middle Name | Hicks Last Name | Case | Case number (if known) | | | |
|--------------------------|--|--|--|---------------------------|------------------------|---|----------|----------------|
| | THISTINGHE | MICUTE NOTE | Last Naire | Column Debtor | | Column B Debtor 2 or non-filing spor | | |
| Do no | | ensation nt if you contend that the amo y Act. Instead, list it here: | unt received was a benefit .↓ | \$0.00 | | | | |
| For yo | | | \$0.00 | | | | | |
| FOI yo | our spouse | | \$0.00 | | | | | |
| | on or retirement t under the Social | t income. Do not include any : Security Act. | amount received that was | a \$ <u>0.00</u> | | | | ı |
| amou payme interna | nt. Do not include ents received as a | er sources not listed above. See any benefits received under the victim of a war crime, a crime or terrorism. If necessary, list of pelow. | ne Social Security Act or against humanity, or | | | , | | · |
| | | | | | | | | |
| Total a | amounts from sep | parate pages, if any. | | +\$0.00 | | + | | |
| | culate your total | current monthly income. Ac | ld lines 2 through 10 for | \$2,566. | .67 + | | = | \$2,566.67 |
| each colu | ımn. Then add th | e total for Column A to the total | al for Column B. | | | *************************************** | | |
| | | | | | | | | Total current |
| Part 2: | Determine Wh | ether the Means Test A | onlies to You | | | | | monthly income |
| | | nt monthly income for the ye | | | | | | |
| | = | rrent monthly income from line | • | | Copy line | e 11 here → | | \$2,566.67 |
| i | Multiply by 12 (the | e number of months in a year). | | | | | L | X 12 |
| 12b. 1 | he result is your a | annual income for this part of t | he form. | | | | 12b. | \$30,800.04 |
| 10 0-1 | | family in a sure Ab ab a small as a | La como Esta de la como de la com | | | | <u> </u> | ·········· |
| 13 Calcu | iate the median | family income that applies | Illinois | 5: | | | | |
| Fill in t | he state in which | you live. | | of Markets | | | | |
| Fill in t | he number of peo | ople in your household. | 4 | he yezh | | | | |
| Fill in t house | | income for your state and size | of | | | | 13. | \$90,080.00 |
| | | le median income amounts, g n. This list may also be availabl | | | ; | | 1 | |
| 14. How 6 | do the lines com | pare? | | | | | | |
| 14a. | Line 12b is les Go to Part 3. | s than or equal to line 13. On | the top of page 1, check | box 1, There is no pr | esumption of abu | ise. | | |
| 14b. | | ore than line 13. On the top of nd fill out Form 122A-2. | page 1, check box 2, The | e presumption of abu | use is determined | by Form 122A-2 | 2. | |
| Part 3: | Sign Below | | | • | - | | | |
| | | | | | | | | : |
| By si | gning here, I decla | are under penalty of perjury tha | t the information on this s | statement and in any | attachments is tr | ue and correct. | | |
| | | 1 /1 | | | | | | |
| x _ | /s/ Lisa Hicks | don the | < | × | | | | |
| Si | gnature of Debtor | 1 | | Signature of Deb | tor 2 | | | |
| Da | ate 12/27/2016 MM/DD/YYY | Y | | Date 12/27/201 MM/DD/Y | | | | |
| | | 4a, do NOT fill out or file Form 4b, fill out Form 122A-2 and f | | | | | | |